

# The Department of the Army

# **Job Opportunity Announcement**

Vacancy Announcement No.: AIU301361

Opening Date: June 12, 2003

Closing Date: June 25, 2003

Position Title (Pay Plan-Series): ELECTROPLATING WORKER (WG-3711)

Grade: 07

Full Performance Grade: 07

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**Comments:** THIS IS A DELEGATED EXAMINING ANNOUNCEMENT, OPEN TO ALL US CITIZENS. THIS VACANCY ANNOUNCEMENT IS NOT COVERED UNDER RESUMIX PROCEDURES. IN ORDER TO BE CONSIDERED FOR THIS POSITION YOU MUST FOLLOW THE DIRECTIONS UNDER HOW TO APPLY AND SUBMIT THE PROPER FORMS. DO NOT CLICK ON THE RESUME BUTTON AT THE END OF THIS ANNOUNCEMENT.

YOU MUST SUBMIT A SEPARATE APPLICATION AND ATTACHMENTS FOR EVERY JOB ANNOUNCEMENT YOU ARE APPLYING FOR. PLEASE MAKE SURE YOUR RESUME/APPLICATION CONTAINS THE JOB ANNOUNCEMENT NUMBER AND YOUR SOCIAL SECURITY NUMBER. YOU MUST INCLUDE THE ANNOUNCEMENT NUMBER ON ALL DOCUMENTS SUBMITTED.

#### **TENURE: Permanent.**

NOTES: (1) Career/career conditional employees selected under this announcement will normally be required to serve a one year probationary period in accordance with 5 CFR 315.801(a)(1). (2) You must follow the procedure stated in the "How to Apply" section to receive consideration under this announcement.

#### CONDITIONS OF EMPLOYMENT:

- 1. Selectee may be required to complete a pre-employment physical.
- 2. Selectee may be required to wear safety clothing and equipment appropriate for the position.
- 3. Permanent change of station (PCS) funds will not be authorized.

### PHYSICAL EFFORT:

Work is normally repetitious and requires continuous use of both hands and arms, and frequent standing, walking, bending, reaching and lifting of objects weighing up to 10 pounds. May occasionally be required to lift objects of heavier weight.

#### **WORKING CONDITIONS:**

Works inside shop area having adequate lighting, heating, ventilation and safety controls. Exposed to acid solutions, solvents, noxious fumes, high humidity and a variety of caustic

chemicals, and must wear safety equipment to provide protection from burns, scalds, and skin irritations.

IN ADDITION TO ANSWERING THE QUALIFICATIONS STATEMENTS, APPLICANTS MUST FILL OUT THE SUPPLEMENTAL QUESTIONNAIRE FOR ELECTROPLATER POSITIONS BELOW IN THE "HOW TO APPLY" SECTION. FAILURE TO FILL OUT THE SUPPLEMENTAL QUESTIONNAIRE WILL RESULT IN AN INELIGIBLE RATING.

# FILING DEADLINE: APPLICATIONS MUST BE RECEIVED BY THE CLOSING DATE. LATE OR INCOMPLETE APPLICATIONS WILL NOT BE CONSIDERED.

Salary: \$14.61 to \$17.05 per hour

Region: Northeast

Organization: Tobyhanna Army Depot, Directorate/Production Support Services, Finishing and Etching Division

Duty Station: Tobyhanna Army Depot, Tobyhanna, PA

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Number of vacancies to be filled by this announcement: Five (5).

Area of Consideration: Opened to all applicants with or without Civil Service Status.

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Duties: Performs the less complex electroplating processes, such as coating metal parts with cadmium, copper, "black magic", etc. Receives assignments and reads work orders indicating type plating required. Affixes work pieces to wire hangers or places smaller pieces in baskets. Processes work pieces through cleaning and stripping tanks to remove paint, old plating, and rusted areas. Processes work pieces through plating tanks according to type plating required; follows standard trade techniques in the electrolysis methods. Immerses work pieces in water and chemical baths to clean and brighten plated surfaces. As assigned, for progressive training in the field, performs the more difficult plating assignments, such as coating metal parts with chrome, silver, nickel, etc. which involves progressive plating and includes grinding, buffing, and polishing. Also, on a rotating basis, is assigned to the phosphating operation or to the anodizing/coloring process for aluminum parts. Maintains work area in a clean and orderly condition.

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Qualification Requirements: Applicants will be evaluated on their ability to perform the duties of an Electroplating Worker rather than length of experience. Eligibility will be determined by the relevance, scope and quality of all experience and training, regardless of where or how acquired. Applicants will be ranked and rated based on their knowledge of the following identified job elements:

KSA 1. ABILITY TO DO THE WORK OF AN ELECTROPLATING WORKER WITHOUT MORE THAN NORMAL SUPERVISION. (Screen Out)

KSA 2. ABILITY TO USE AND MAINTAIN TOOLS AND EQUIPMENT.

KSA 3. ABILITY TO USE ELECTROPLATING INSTRUCTIONS.

KSA 4. ABILITY TO USE AND MAINTAIN ELECTROPLATING PROCESSES (TECHNICAL PRACTICES).

KSA 5. PLATING AND COATING DEXTERITY AND SAFETY.

KSA 6. KNOWLEDGE OF ELECTROPLATING PROCESSES AND METALS.

Please use a separate sheet(s) of bond paper to address these job elements.

IN ADDITION, APPLICANTS MUST FILL OUT THE SUPPLEMENTAL QUESTIONNAIRE FOR ELECTROPLATER POSITIONS BELOW.

-----Selective Placement Factors/Knowledge Skills and Abilities (KSA's): None required.

**Standard/Other Requirements/ Instructions on How to Apply:** 1. Failure to provide all of the required information as stated in the announcement may result in an ineligible rating or may affect the overall rating.

- 2. Permanent change of station (PCS) funds will not be authorized.
- 3. Selection for this position is contingent upon proof of U.S. citizenship.
- 4. Direct Deposit is REQUIRED: As a condition of employment, candidates appointed, competitively promoted or reassigned are required to enroll and participate in Direct Deposit/Electronic Funds Transfer within 60 days following the effective date of that action.
- 5. Application/Resume deadline: Application/Resume must be received by the Closing Date of the Vacancy Announcement.
- 6. Male applicants born after December 31, 1959, are required to complete a Pre-Employment Certification Statement for Selective Service registration prior to appointment. Failure to comply may be grounds for withdrawal of an offer of employment, or dismissal after appointment.

# **HOW TO APPLY:**

Submit the following documents to the address listed under Where To Submit Package:

1. OF612, Optional Application for Federal Employment (this form can be found at www.opm.gov/forms/word/of612.doc, or a Resume. The resume may be typed or legibly handwritten and must contain, at a minimum: Announcement Number; Name; Address; Social Security Number; Position Title and Grade of the job you are applying for; your paid/unpaid work experience including job title, duties and accomplishments, employers name and address, supervisors name and phone number, starting and ending dates (Month and Year), hours worked per week and grade/salary; education.

- 2. College Transcripts (if applicable).
- 3. Your response to the specific job elements as described under Qualifications.
- **4.** Applicants claiming veterans' preference must CLEARLY do so in their resume/application. Applicants claiming 5-point preference must include specific, detailed information in their resume/application which supports their claim for veterans' preference, e.g., actual dates of service, type of duty (active, reservist), campaign badges or medals awarded, rank at time of retirement, etc. If information needed to verify entitlement to veterans preference is

not provided in the resume/application, preference will be denied. Applicants claiming 10-point preference MUST submit a DD Form 214 AND supporting documentation, e.g., Letter from VA dated within one year. Failure to submit supporting documentation will result in loss of consideration for 10-point preference. If veterans preference is awarded and the applicant selected, a DD Form 214 (Member-4 copy) is required at the time of appointment to verify preference. Failure to provide the DD Form 214 at the time of appointment will result in the offer of employment being withdrawn.

#### **NOTE FOR MILITARY SPOUSES:**

Spouses of active duty military members of the Armed Forces may receive preference in hiring under this announcement if they are among the best qualified candidates referred for the position and are within reach for selection. Spouse preference eligibles must provide a copy of sponsors Permanent Change of Station (PCS) orders AND clearly state in their resume that they are requesting Military Spouse Preference in order to be considered for this preference.

**SPECIAL PRIORITY CONSIDERATION UNDER THE INTERAGENCY CAREER TRANSITION ASSISTANCE PLAN (ICTAP).** If you are a displaced Federal employee (Non-DOD), you may be entitled to receive special priority consideration under ICTAP.

If you are a displaced Department of Defense (DOD) employee, DOD has established other programs such as the Priority Placement Program (PPP), and Reemployment Priority List (RPL) for DODs displaced employees. If you have questions, contact your appropriate Civilian Assistance and Reemployment Program (CARE) office. For ICTAP,

(NOTE: Eligibility expires (a) one year after separation; (b) one year after an agency certifies that an employees compensation (OWCP) has been terminated and the individual can not be placed at the agency; (c) one year after an employees disability annuity has been terminated or after being notified that his/her annuity will be terminated; (d) when an employee accepts a position without time limitations; (e) when an employee no longer meets eligibility requirements; or (f) within a specific agency, upon declination of offer to that employee by that agency.)

To receive consideration, you must:

- 1. Be a current or former career or career-conditional (Tenure group I or II) competitive service employee who has been displaced.
- 2. Be applying for a position at or below the grade level of the position from which you have been separated. The position must not have a greater promotion potential than the position from which you were separated.
- 3. Have a current (or last) performance rating of record that is fully successful or better. This must be submitted with your application package. (This requirement does not apply to candidates who are eligible due to compensable injury or disability retirement.)
- 4. Occupy or be displaced from a position in the same local commuting area of the position for which you are requesting priority consideration.
- 5. Have your application received (unless otherwise specified by the announcement) by the closing date and meet all of the application criteria (e.g., submit all required documentation, etc).
- 6. Submit a copy of the appropriate documentation with your application package, such as a RIF separation notice, a letter from OPM or your agency documenting your priority consideration rights.
- 7. Be rated well-qualified. A well qualified employee is defined as meeting all of the minimum qualification standards and eligibility requirements as well as possessing knowledge, skills and abilities that clearly exceed the minimum qualification requirements for the position. To be rated well qualified, ICTAP applicants must attain an eligibility rating on this case examination of 80 points or higher, not including points for veterans preference.

NOTE: If you wish to be considered through this program, please mark (ICTAP) clearly on your application.

#### Where to Submit Package:

Please send all required application materials to: Northeast CPOC 314 Johnson Street Attention: DEU Aberdeen Proving Ground, MD 21005-5283

You may fax your complete application package to 410-306-1284 or DSN 458-1284, ATTN: DEU.

You may call 410 306-0031 to inquire about announcements/applications.

NOTE: In order to receive consideration, your application must contain all of the applicable information/documents listed under How To Apply. Applications received through the use of postage paid government envelopes are in violation of 18 USC 1719 and will not be considered.

#### SUPPLEMENTAL QUESTIONNAIRE FOR ELECTROPLATER POSITIONS

COMPLETE AND SUBMIT THIS SUPPLEMENTAL FORM WITH YOUR APPLICATION. FAILURE TO COMPLETE AND SUBMIT THIS QUESTIONNAIRE WITH YOUR APPLICATION FOR EMPLOYMENT MAY RESULT IN AN INELIGIBLE RATING.

#### **INSTRUCTIONS - READ CAREFULLY -**

The information requested on this form is needed to rate your application. Fill out these pages completely and accurately. The questions have been designed to cover a wide range of skills and knowledges in order to ensure that you receive all appropriate credit to which entitled. However, you are not expected to have full knowledge of every element listed. Be sure your answers reflect YOUR OWN actual skills and knowledges. Your Social Security Number is used to identify this form with your basic application for Federal employment. (If more space is required, attach additional sheet(s).) THE INFORMATION YOU PROVIDE ON THIS SUPPLEMENTAL QUESTIONNAIRE MUST BE SUPPORTED BY EMPLOYMENT INFORMATION CONTAINED ON YOUR APPLICATION OR RESUME FOR EMPLOYMENT.

NAME (Last, First, Middle)
Date of Birth
Social Security No.
Requisition Number (found at the top or bottom of the announcement):

ANSWER ALL THE QUESTIONS BELOW. FOR SCHOOLING, INCLUDE FORMAL SCHOOL, TRADE SCHOOL, MILITARY CLASSES, ETC.; STATE SUBJECT, NAME AND ADDRESS OF SCHOOL, TIME SPENT ON EACH SUBJECT, AND GRADES. TELL ABOUT YOUR EXPERIENCE, PAID OR UNPAID, PART TIME OR FULL TIME, AND IN HOBBIES.

# ELEMENT A. ABILITY TO DO THE WORK OF ELECTROPLATING WORKER:

(APPLICANTS SHOULD COMPLETE ELEMENTS B THROUGH F BEFORE COMPLETING/RESPONDING TO THIS ELEMENT).

SELECT THE DEFINITION BELOW THAT BEST DESCRIBES YOUR OVERALL EXPERIENCE AND TRAINING PERTAINING TO THE ELECTROPLATING OCCUPATION.

| Give the number of the Statement of Ability from above that applies to your experience with this tool or equipment: Give a brief example of how you used this tool or equipment:  |
|---|
| Name of tool or equipment used:   |
|   |
| tool or equipment: Give a brief example of how you used this tool or equipment:   |
| Give the number of the Statement of Ability from above that applies to your experience with this tool or equipment:   |
| Name of tool or equipment used:   |
| ELEMENT B. ABILITY TO USE AND MAINTAIN TOOLS AND EQUIPMENT:  A. List below the specific equipment, tools and measuring devices pertinent to the Electroplating trade for which you have had experience, such as automated equipment, standard job shop equipment such as meters, gages, etc. For each tool or equipment you list, select from B. Statement of Ability below the one or ones that describe your ability on that tool or equipment.  B. Statement of Ability:  1. Do routine jobs.  2. Had training on this equipment.  3. Limited experience under close guidance.  4. Select and use tool or equipment on own responsibility.  5. Considered an expert in using this tool or equipment. |
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| Experience and training include performing repetitive plating and metal treatment tasks such as cleaning, masking, degreasing, barrel plating, unmasking and drying parts. Tasks are performed in accordance with specific instructions or work orders.   |
| Experience and training include the ability to process metal items in established or a repetitive series of chemical or electrolytic solutions. Adjusts solution level, temperature and electrolytic settings based on manufacturers specifications, technical, written or oral orders.   |
| Experience and training include the ability to independently plate, coat or treat parts (or designated areas of parts) with electrolytic and chemical treatments or special acid treatments based on work orders/specifications. Adapts or modifies operating methods, procedures or techniques to do precision work on new or unusual jobs. Plans and lays out work utilizing blueprints, sketches, manufacturers/technical specifications, laboratory analysis reports, oral /written instructions and ensures all safety requirements/specifications are met.  |

| Name of tool or equipment used:   |
|---|
| Give the number of the Statement of Ability from above that applies to your experience with this tool or equipment:  Give a brief example of how you used this tool or equipment: |
|   |
| Name of tool or equipment used:   |
| Give the number of the Statement of Ability from above that applies to your experience with this tool or equipment: Give a brief example of how you used this tool or equipment:  |
|   |
|   |
| Name of tool or equipment used:   |
| Give the number of the Statement of Ability from above that applies to your experience with this tool or equipment:  Give a brief example of how you used this tool or equipment: |
|   |

# **ELEMENT C. ABILITY TO USE AND INTERPRET ELECTROPLATING INSTRUCTIONS:**

Describe (give specific examples) of the written instructions, specifications, work orders, manuals and blueprints you have had to interpret and apply to perform Electroplating work.

Also, describe (give specific examples) of oral instructions/guidance you received regarding Electroplating work.

When performing Electroplating work did you have to adapt or modify operating methods, procedures or techniques to perform precision work on new or unusual Electroplating jobs? Provide specific examples of the adaptation/modifications that you implemented.

# ELEMENT D. ABILITY TO USE AND MAINTAIN ELECTROPLATING PROCESSESS (TECHNICAL PRACTICES):

Describe (give specific examples) of the electrolytic and chemical processes, anodes, holding devices, jigs and/or fixtures you have utilized in Electroplating work. Describe the solutions, brighteners, wetting agents or other compounds you have used to produce the specified or desired coating.

When performing Electroplating work were you required to identify and correct problems? Describe (give specific examples) of the types of problems you encountered, how you identified the problem and the corrective action you initiated or recommended to resolve the electroplating problem.

# **ELEMENT E. PLATING AND COATING DEXTERITY AND SAFETY:**

Describe any formal Electroplating safety training courses you have completed (provide the name of the course, date of completion and whether a certificate of training was issued by your employer).

Have you received any recognition from your employer pertaining to Electroplating Safety practices?

Describe any on-the-job safety meetings that you attended. Provide examples of safety measures or issues regarding Electroplating processes that were addressed/discussed.

Describe your safety record while employed as an Electroplater (include in this information your dates of employment (month/year to month/year), your involvement in any work related accident (provide specific information regarding any accident). Also, describe any preventative measures you initiated or practiced to ensure a safe working environment (describe protective clothing, equipment and preventative measures you followed when performing Electroplating duties). Provide a brief description of the safety codes, regulations, manuals or shop guidelines that you followed to ensure a safe working environment.

# **ELEMENT F. KNOWLEDGE OF ELECTROPLATING PROCESSES AND METALS:**

Describe your experience/knowledge (provide specific examples) using special treatments such as nitric acid or cyanide copper strike to prepare alloys for plating.

Describe your experience/knowledge (provide specific examples) pertaining to the proper acid for stripping aluminum alloys, the proper acid or cyanide for pickling steel alloys and/or the oxide, phosphate, chromate or similar processes for treating other metals and alloys.

Describe your experience/knowledge (provide specific examples) pertaining to the appropriate chemicals to replenish solutions with brightness, wetting agents and/or other compounds to produce the desired crystal size, brittleness or deposited finish.

Describe your experience/knowledge (provide specific examples) pertaining to cleaning tasks such as brushing, filing and/or degreasing items. Describe the degreasing solutions you have used.

Describe the electroplating processes (provide specific examples) that you used to remove masking materials, to prepare or treat parts or an item for corrosion resistance.

#### ATTENTION THIS STATEMENT MUST BE SIGNED.

A false answer to any questions on this Supplemental Questionnaire may be grounds for not employing you or for dismissing you after you begin work. All statements are subject to verification/investigation.

I certify that all statements made in this Supplemental Questionnaire are true, complete and correct to the best of my knowledge and belief and are made in good faith.

| Signature of Applicant and Date |  |
|---------------------------------|--|
|                                 |  |
|                                 |  |

If you would like to be considered, then you are required to submit all necessary materials applicable to this vacancy announcement.

# THE DEPARTMENT OF THE ARMY IS AN EQUAL OPPORTUNITY EMPLOYER.

Applicants will receive appropriate consideration without regard to non-merit factors such as race, color, religion, sex, national origin, marital status, sexual orientation except where specifically authorized by law, age, politics or disability which do not relate to successful performance of the duties of this position. Otherwise qualified applicants with disabilities who need reasonable accommodation may notify the agency Point of Contact on this announcement of their need.

SELECTION FOR THIS POSITION IS SUBJECT TO RESTRICTIONS RESULTING FROM DEPARTMENT OF DEFENSE REFERRAL SYSTEM FOR DISPLACED EMPLOYEES.